

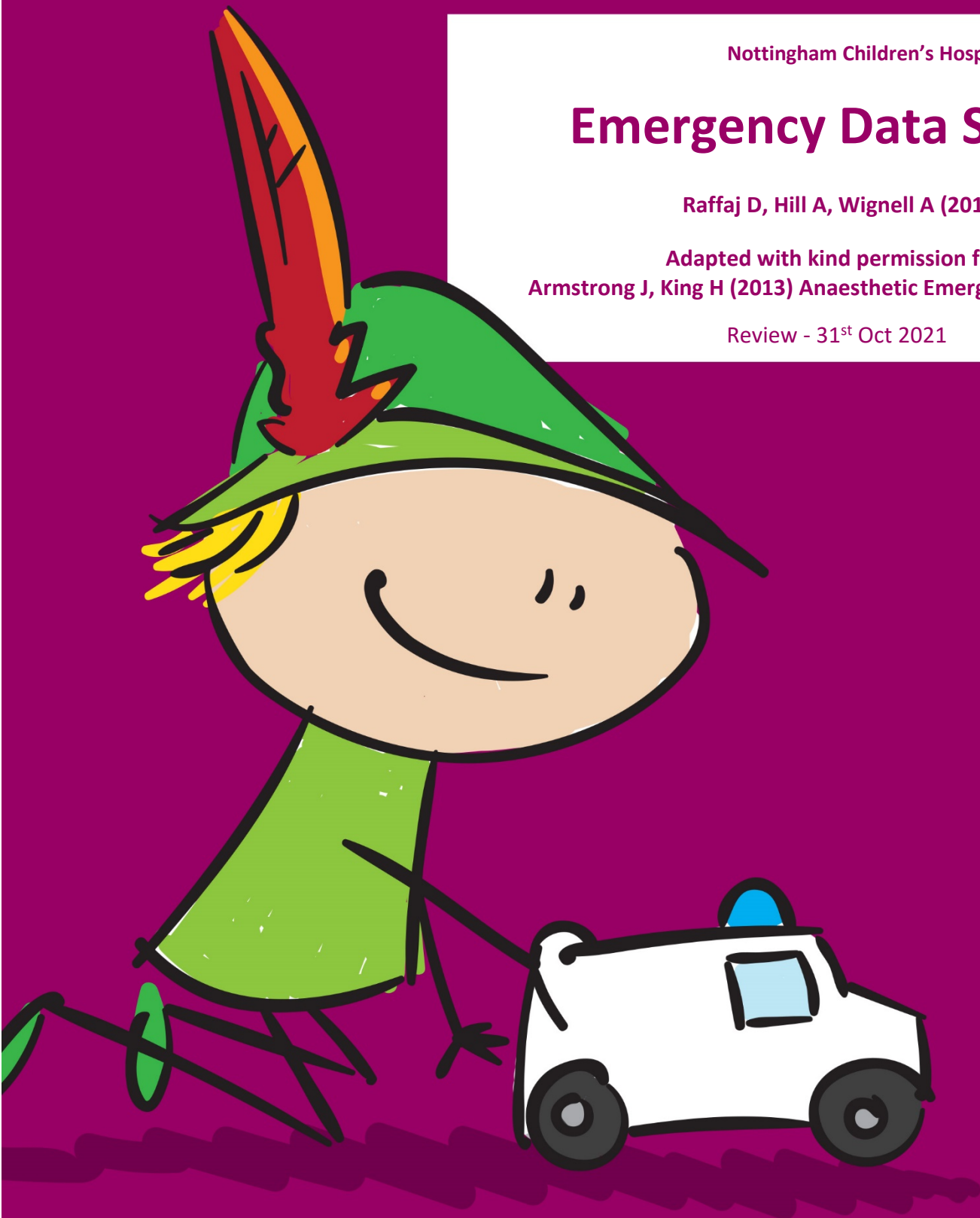
Nottingham Children's Hospital Transport Team

Emergency Data Sheets

Raffaj D, Hill A, Wignell A (2016)

Adapted with kind permission from
Armstrong J, King H (2013) Anaesthetic Emergency Data Sheets

Review - 31st Oct 2021



Paediatric Transport Team Emergency Data Sheets

Age 1 to 12 months

$$(\text{Age in months} \times 0.5) + 4$$

Age 1 to 5 years

$$(\text{Age} \times 2) + 8$$

Age 6 to 12 years

$$(\text{Age} \times 3) + 7$$

3 kg

4 kg

5 kg

6 kg

7 kg

8 kg

9 kg

10 kg

12 kg

14 kg

16 kg

18 kg

20 kg

25 kg

28 kg

31 kg

34 kg

37 kg

40 kg

43 kg

45 kg

50 kg

55 kg

60 kg

3kg

Birth

HR: 110-160 RR: 30-40 BP: 70-80

Airway

OP Airway Size: 000

**ETT Diameter: Cuffed: 2.5-3
Uncuffed: 3.0-3.5**

LMA Size: 1

**ETT Length : Oral: 9-10cm
Nasal: 10 cm**

Cardiac/ Resus

Drug		Required Dose	Dose to be given	Volume	Additional Instructions
Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	30 micrograms	0.3 ml	Max 1mg to be given
	Anaphylaxis-IM	5 microgram/kg Use 1:1000	15 micrograms	0.015 ml	
	Croup-Neb	400 microgram /kg Use 1:1000	1.2 mg	1.2 ml	
Energy	VF/pulseless VT	4J/Kg	12 J (Round up)		
Adenosine	1st Dose	100 microgram/kg	0.3 mg	0.1 ml	Max 3mg
	2nd Dose	200 microgram/kg	0.6 mg	0.2 ml	Max 6mg
	3rd Dose	300 microgram/kg	0.9 mg	0.3 ml	Max 12mg
Amiodarone		5 mg/kg	15 mg	0.3 ml	Further dilute to 10ml with 5% glucose Max 300mg
Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	3 mmol	6 ml	
	8.4%	1mmol/kg (1ml/kg)	3 mmol	3 ml	
10% Calcium Chloride		0.2ml/kg	0.6 ml	0.6 ml	Slow Iv injection (max 10 ml)

Fluids

Crystalloid	Trauma (10 mL/kg):	30 ml	Blood, FFP or Platelets (10 mL/kg)	30 ml
	Other (20 mL/kg) :	60 ml		
10% Dextrose (2 mL/kg): (Hypoglycaemia)		6 ml	Mannitol 20 % (1.25-2.5ml/kg)	3.75 -7.5 ml

Sepsis

	Cefotaxime ¹	Amoxicillin ²	Gentamicin ³	Ceftriaxone ⁴
<28 days	50mg/kg =150 mg	100 mg/kg =300 mg	4mg/kg OD (Over 3min) =12 mg	
28 days- 3months	50mg/kg =150 mg	50 mg/kg QDS =150 mg	7 mg/kg OD (over 30 min) 21 mg	
Over 3 months			7 mg/kg OD (over 30 min) 21 mg	80mg/kg OD 240 mg

¹Cefotaxime: 12- hourly if aged under 7 days, 8 hourly if aged 7-21 days, 6 hourly if over 21 days. ²Amoxicillin: 12 hourly if aged under 7 days, 8 hourly if aged 7-28 days ³Gentamicin: Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. ⁴Ceftriaxone: If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

3kg

3kg

3kg

3kg

3kg

3kg

3kg

3kg

3kg

3kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	100 microgram 1 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	3-12 mg 0.3-1.2 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	6 mg 0.24 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	6 mg 0.6 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	0.3 mg 0.3 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 micrograms/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	3 -6 micrograms 0.3 -0.6 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	0.3 mg 0.3 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (2 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	6 mg 0.6 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	1.5 mg 0.15 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	3 mg 0.3 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat	48 mg 0.48 ml of neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

3kg
3kg
3kg
3kg
3kg
3kg
3kg
3kg
3kg
3kg

4kg

Approx 1 month

HR: 110-160 RR: 30-40 BP_(systolic): 80-90
Airway
OP Airway Size: 00
ETT Diameter: Cuffed: 3
Uncuffed: 3.5
LMA Size: 1
ETT Length : Oral: 10 cm
Nasal: 11 cm
Cardiac/ Resus
Drug
Required Dose
Dose to be given
Volume
Additional Instructions

Adrenaline

Arrest-IV

 10 microgram /kg
Use 1:10,000

40 micrograms

0.4 ml

Max 1mg to be given

Anaphylaxis-IM

 5 microgram/kg
Use 1:1000

20 micrograms

0.02 ml

Croup-Neb

 400 microgram /kg
Use 1:1000

1600 micrograms

1.6 ml

Energy

VF/pulseless VT

4J/Kg

16 J (Round up)

Adenosine

1st Dose

100 microgram/kg

0.4 mg

0.13 ml

Max 3mg

2nd Dose

200 microgram/kg

0.8 mg

0.27 ml

Max 6mg

3rd Dose

300 microgram/kg

1.2 mg

0.4 ml

Max 12mg

Amiodarone

5 mg/kg

20 mg

0.4 ml

 Further dilute to 10ml
with 5% glucose **Max 300mg**

Sodium Bicarb

4.2%

1mmol/kg (2ml/kg)

4 mmol

8 ml

8.4%

1mmol/kg (1ml/kg)

4 mmol

4 ml

10% Calcium Chloride

0.2ml/kg

0.8 ml

0.8 ml

 Slow Iv injection (max
10 ml)

Fluids

Crystalloid

Trauma (10 mL/kg):

40 ml

 Blood, FFP or Platelets
(10 mL/kg)

40 ml

Other (20 mL/kg) :

80 ml

10% Dextrose (2 mL/kg): (Hypoglycaemia)

8 ml

 Mannitol 20 %
(1.25-2.5ml/kg)

5 -10 ml

Sepsis
Cefotaxime¹
Amoxicillin²
Gentamicin³
Ceftriaxone⁴

<28 days

50mg/kg

=200 mg

100 mg/kg

=400 mg

4mg/kg OD (Over 3min)

=16 mg

28 days- 3months

50mg/kg

=200 mg

50 mg/kg QDS

=200 mg

 7 mg/kg OD (over 30
min)

28 mg

Over 3 months

 7 mg/kg OD (over 30
min)

28 mg

80mg/kg OD

320 mg

¹Cefotaxime: 12- hourly if aged under 7 days, 8 hourly if aged 7-21 days, 6 hourly if over 21 days. ²Amoxicillin: 12 hourly if aged under 7 days, 8 hourly if aged 7-28 days ³Gentamicin: Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. ⁴Ceftriaxone: If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

4kg
4kg
4kg
4kg
4kg
4kg
4kg
4kg
4kg
4kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	100 micrograms 1 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	4-16 mg 0.4-1.6 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	8 mg 0.32 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	8 mg 0.8 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	0.4 mg 0.4 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	4 -8 micrograms 0.4 -0.8 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	0.4 mg 0.4 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (2 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	8 mg 0.8 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	2 mg 0.2 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	4 mg 0.4 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat	64 mg 0.64 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

4kg

4kg

4kg

4kg

4kg

4kg

4kg

4kg

4kg

4kg

5kg
Approx 2 months
HR: 110-160 RR: 30-40 BP_(systolic): 80-90
Airway
OP Airway Size: 00
ETT Diameter: Cuffed: 3
Uncuffed: 3.5
LMA Size: 1- 1.5
ETT Length : Oral: 10.5 cm
Nasal: 11.5 cm
Cardiac/ Resus
Drug
Required Dose
Dose to be given
Volume
Additional Instructions
Adrenaline
Arrest-IV
**10 microgram /kg
Use 1:10,000**
50 micrograms
0.5 ml
Max 1mg to be given
Anaphylaxis-IM
**5 microgram/kg
Use 1:1000**
25 micrograms
0.025 ml
Croup-Neb
**400 microgram /kg
Use 1:1000**
2 mg
2 ml
Energy
VF/pulseless VT
4J/Kg
20 J (Round up)
Adenosine
1st Dose
100 microgram/kg
0.5 mg
0.17 ml
Max 3mg
2nd Dose
200 microgram/kg
1 mg
0.3 ml
Max 6mg
3rd Dose
300 microgram/kg
1.5 mg
0.5 ml
Max 12mg
Amiodarone
5 mg/kg
25 mg
0.5 ml
**Further dilute to 10ml
with 5% glucose **Max
300mg****
Sodium Bicarb
4.2%
1mmol/kg (2ml/kg)
5 mmol
10 ml
8.4%
1mmol/kg (1ml/kg)
5 mmol
5 ml
10% Calcium Chloride
0.2ml/kg
1 ml
1 ml
**Slow Iv injection (max
10 ml)**
Fluids
Crystalloid
Trauma (10 mL/kg):
50 ml
**Blood, FFP or Platelets
(10 mL/kg)**
50 ml
Other (20 mL/kg) :
100 ml
10% Dextrose (2 mL/kg): (Hypoglycaemia)
10 ml
**Mannitol 20 %
(1.25-2.5ml/kg)**
6.25 -12.5 ml
Sepsis
Cefotaxime¹
Amoxicillin²
Gentamicin³
Ceftriaxone⁴
<28 days
**50mg/kg
=250 mg**
**100 mg/kg
=500 mg**
**4mg/kg OD (Over 3min)
=20 mg**
28 days- 3months
**50mg/kg
=250 mg**
**50 mg/kg QDS
=250 mg**
**7 mg/kg OD (over 30
min)
35 mg**
Over 3 months
**7 mg/kg OD (over 30
min)
35 mg**
**80mg/kg OD
400 mg**

¹Cefotaxime: 12- hourly if aged under 7 days, 8 hourly if aged 7-21 days, 6 hourly if over 21 days. ²Amoxicillin: 12 hourly if aged under 7 days, 8 hourly if aged 7-28 days ³Gentamicin: Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. ⁴Ceftriaxone: If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

5kg
5kg
5kg
5kg
5kg
5kg
5kg
5kg
5kg
5kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	100 micrograms 1 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	5-20 mg 0.5-2 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	10 mg 0.4 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	10 mg 1 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	0.5 mg 0.5 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	5 -10 micrograms 0.5 -1 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	0.5 mg 0.5 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (2 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	10 mg 1 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	2.5 mg 0.25 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/mL)	5 mg 0.5 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat	80 mg 0.8 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

5kg

5kg

5kg

5kg

5kg

5kg

5kg

5kg

5kg

5kg

6kg
Approx 4 months
HR: 110-160 RR: 30-40 BP_(systolic): 80-90
Airway
OP Airway Size: 00
ETT Diameter: Cuffed: 3
Uncuffed: 3.5
LMA Size: 1- 1.5
ETT Length : Oral: 11 cm
Nasal: 12 cm
Cardiac/ Resus
Drug
Required Dose
Dose to be given
Volume
Additional Instructions
Adrenaline
Arrest-IV
**10 microgram /kg
Use 1:10,000**
60 micrograms
0.6 ml
Max 1mg to be given
Anaphylaxis-IM
**5 microgram/kg
Use 1:1000**
30 micrograms
0.03 ml
Croup-Neb
**400 microgram /kg
Use 1:1000**
2.4mg
2.4 ml
Energy
VF/pulseless VT
4J/Kg
24 J (Round up)
Adenosine
1st Dose
100 microgram/kg
0.6 mg
0.2 ml
Max 3mg
2nd Dose
200 microgram/kg
1.2 mg
0.4 ml
Max 6mg
3rd Dose
300 microgram/kg
1.8 mg
0.6 ml
Max 12mg
Amiodarone
5 mg/kg
30 mg
0.6 ml
**Further dilute to 10ml
with 5% glucose **Max
300mg****
Sodium Bicarb
4.2%
1mmol/kg (2ml/kg)
6 mmol
12 ml
8.4%
1mmol/kg (1ml/kg)
6 mmol
6 ml
10% Calcium Chloride
0.2ml/kg
1.2 ml
1.2 ml
**Slow Iv injection (max
10 ml)**
Fluids
Crystalloid
Trauma (10 mL/kg):
60 ml
**Blood, FFP or Platelets
(10 mL/kg)**
60 ml
Other (20 mL/kg) :
120 ml
10% Dextrose (2 mL/kg): (Hypoglycaemia)
12 ml
**Mannitol 20 %
(1.25-2.5ml/kg)**
7.5 -15 ml
Sepsis
Cefotaxime¹
Amoxicillin²
Gentamicin³
Ceftriaxone⁴
<28 days
**50mg/kg
=300 mg**
**100 mg/kg
=600 mg**
**4mg/kg OD (Over 3min)
=24 mg**
28 days- 3months
**50mg/kg
=300 mg**
**50 mg/kg QDS
=300 mg**
**7 mg/kg OD (over 30
min)
42 mg**
Over 3 months
**7 mg/kg OD (over 30
min)
42 mg**
**80mg/kg OD
480 mg**

¹Cefotaxime: 12- hourly if aged under 7 days, 8 hourly if aged 7-21 days, 6 hourly if over 21 days. ²Amoxicillin: 12 hourly if aged under 7 days, 8 hourly if aged 7-28 days ³Gentamicin: Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. ⁴Ceftriaxone: If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

6kg
6kg
6kg
6kg
6kg
6kg
6kg
6kg
6kg
6kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600microgram/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	120 micrograms 1.2 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	6-24 mg 0.6-2.4 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	12 mg 0.48 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	12 mg 1.2 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	0.6 mg 0.6 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 mcg/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	6 -12 micrograms 0.6 -1.2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	0.6 mg 0.6 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (2 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	12 mg 1.2 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	3 mg 0.3 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	6 mg 0.6 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat	96 mg 0.96 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

6kg 6kg 6kg 6kg 6kg 6kg 6kg 6kg 6kg 6kg

7kg

Approx 6 months

HR: 110-160 RR: 30-40 BP_(systolic): 80-90
Airway
OP Airway Size: 00
ETT Diameter: Cuffed: 3.0 mm
Uncuffed: 4.0 mm
LMA Size: 1.5
ETT Length : Oral: 11.5 cm
Nasal: 12.5 cm
Cardiac/ Resus
Drug
Required Dose
Dose to be given
Volume
Additional Instructions

Adrenaline

Arrest-IV

10 microgram /kg
Use 1:10,000

70 micrograms

0.7 ml

Max 1mg to be given

Anaphylaxis-IM

5 microgram/kg
Use 1:1000

35 micrograms

0.035 ml

Croup-Neb

400 microgram /kg
Use 1:1000

2.8 mg

2.8 ml

Energy

VF/pulseless VT

4J/Kg

28 J (Round up)

Adenosine

1st Dose

100 microgram/kg

0.7 mg

0.23 ml

Max 3mg

2nd Dose

200 microgram/kg

1.4 mg

0.47 ml

Max 6mg

3rd Dose

300 microgram/kg

2.1 mg

0.7 ml

Max 12mg

Amiodarone

5 mg/kg

35 mg

0.7 ml

Further dilute to 10ml
with 5% glucose **Max 300mg**

Sodium Bicarb

4.2%

1mmol/kg (2ml/kg)

7 mmol

14 ml

8.4%

1mmol/kg (1ml/kg)

7 mmol

7 ml

10% Calcium Chloride

0.2ml/kg

1.4 ml

1.4 ml

Slow Iv injection (max
10 ml)

Fluids

Crystalloid

Trauma (10 mL/kg):

70 ml

Blood, FFP or Platelets
(10 mL/kg)

70 ml

Other (20 mL/kg) :

140 ml

10% Dextrose (2 mL/kg): (Hypoglycaemia)

14 ml

Mannitol 20 %
(1.25-2.5ml/kg)

8.75 -17.5 ml

Sepsis
Cefotaxime¹
Amoxicillin²
Gentamicin³
Ceftriaxone⁴

<28 days

50mg/kg
=350 mg

100 mg/kg
=700 mg

4mg/kg OD (Over 3min)
=28 mg

28 days- 3months

50mg/kg
=350 mg

50 mg/kg QDS
=350 mg

7 mg/kg OD (over 30
min)
49 mg

Over 3 months

7 mg/kg OD (over 30
min)
49 mg

80mg/kg OD
560 mg

¹Cefotaxime: 12- hourly if aged under 7 days, 8 hourly if aged 7-21 days, 6 hourly if over 21 days. ²Amoxicillin: 12 hourly if aged under 7 days, 8 hourly if aged 7-28 days ³Gentamicin: Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. ⁴Ceftriaxone: If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

7kg
7kg
7kg
7kg
7kg
7kg
7kg
7kg
7kg
7kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	140 micrograms 1.4 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	7-28 mg 0.7-2.8 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	14 mg 0.56 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	14 mg 1.4 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	0.7 mg 0.7 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	7 -14 micrograms 0.7 -1.4 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	0.7 mg 0.7 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 10mg		
Suxamethonium (2 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	14 mg 1.4 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	3.5 mg 0.35 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	7 mg 0.7 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	112 mg 1.1 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

7kg

7kg

7kg

7kg

7kg

7kg

7kg

7kg

7kg

7kg

8kg
Approx 8 months
HR: 110-160 RR: 30-40 BP_(systolic): 80-90
Airway
OP Airway Size: 00
ETT Diameter: Cuffed: 3.5 mm
Uncuffed: 4.0 mm
LMA Size: 1.5
ETT Length : Oral: 12 cm
Nasal: 13 cm
Cardiac/ Resus
Drug
Required Dose
Dose to be given
Volume
Additional Instructions
Adrenaline
Arrest-IV
**10 microgram /kg
Use 1:10,000**
80 micrograms
0.8 ml
Max 1mg to be given
Anaphylaxis-IM
**5 microgram/kg
Use 1:1000**
40 micrograms
0.04 ml
Croup-Neb
**400 microgram /kg
Use 1:1000**
3.2 mg
3.2 ml
Energy
VF/pulseless VT
4J/Kg
32 J (Round up)
Adenosine
1st Dose
100 microgram/kg
0.8 mg
0.27 ml
Max 3mg
2nd Dose
200 microgram/kg
1.6 mg
0.53 ml
Max 6mg
3rd Dose
300 microgram/kg
2.4 mg
0.8 ml
Max 12mg
Amiodarone
5 mg/kg
40 mg
0.8 ml
**Further dilute to 10ml
with 5% glucose **Max
300mg****
Sodium Bicarb
4.2%
1mmol/kg (2ml/kg)
8 mmol
16 ml
8.4%
1mmol/kg (1ml/kg)
8 mmol
8 ml
10% Calcium Chloride
0.2ml/kg
1.6 ml
1.6 ml
**Slow Iv injection (max
10 ml)**
Fluids
Crystalloid
Trauma (10 mL/kg):
80 ml
Other (20 mL/kg) :
160 ml
**Blood, FFP or Platelets
(10 mL/kg)**
80 ml
10% Dextrose (2 mL/kg): (Hypoglycaemia)
16 ml
**Mannitol 20 %
(1.25-2.5ml/kg)**
10 -20 ml
Sepsis
Gentamicin¹
Ceftriaxone²
Over 3 months
7 mg/ Kg OD (over 30 min)
80 mg/kg OD over 30 min
56 mg
640 mg

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

8kg
8kg
8kg
8kg
8kg
8kg
8kg
8kg
8kg
8kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	160 micrograms 1.6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	8-32 mg 0.8-3.2 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	16 mg 0.64 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	16 mg 1.6 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	0.8 mg 0.8 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	8 -16 micrograms 0.8 -1.6 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	0.8 mg 0.8 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 10mg		
Suxamethonium (2 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	16 mg 1.6 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	4 mg 0.4 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	8 mg 0.8 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	128 mg 1.3 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

8kg

8kg

8kg

8kg

8kg

8kg

8kg

8kg

8kg

8kg

9kg
Approx 10 months
HR: 110-160 RR: 30-40 BP_(systolic): 80-90
Airway
OP Airway Size: 00
ETT Diameter: Cuffed: 3.5 mm
Uncuffed: 4.0 mm
LMA Size: 1.5
ETT Length : Oral: 12.5 cm
Nasal: 13.5 cm
Cardiac/ Resus
Drug
Required Dose
Dose to be given
Volume
Additional Instructions
Adrenaline
Arrest-IV
**10 microgram /kg
Use 1:10,000**
90 micrograms
0.9 ml
Max 1mg to be given
Anaphylaxis-IM
**5 microgram/kg
Use 1:1000**
45 micrograms
0.045 ml
Croup-Neb
**400 microgram /kg
Use 1:1000**
3.6 mg
3.6 ml
Energy
VF/pulseless VT
4J/Kg
36 J (Round up)
Adenosine
1st Dose
100 microgram/kg
0.9 mg
0.3 ml
Max 3mg
2nd Dose
200 microgram/kg
1.8 mg
0.6 ml
Max 6mg
3rd Dose
300 microgram/kg
2.7 mg
0.9 ml
Max 12mg
Amiodarone
5 mg/kg
45 mg
0.9 ml
**Further dilute to 10ml
with 5% glucose **Max
300mg****
Sodium Bicarb
4.2%
1mmol/kg (2ml/kg)
9 mmol
18 ml
8.4%
1mmol/kg (1ml/kg)
9 mmol
9 ml
10% Calcium Chloride
0.2ml/kg
1.8 ml
1.8 ml
**Slow Iv injection (max
10 ml)**
Fluids
Crystalloid
Trauma (10 mL/kg):
90 ml
**Blood, FFP or Platelets
(10 mL/kg)**
90 ml
Other (20 mL/kg) :
180 ml
10% Dextrose (2 mL/kg): (Hypoglycaemia)
18 ml
**Mannitol 20 %
(1.25-2.5ml/kg)**
11.25 -22.5 ml
Sepsis
Gentamicin¹
Ceftriaxone²
Over 3 months
7 mg/ Kg OD (over 30 min)
80 mg/kg OD over 30 min
63 mg
720 mg

¹**Gentamicin:** Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

9kg
9kg
9kg
9kg
9kg
9kg
9kg
9kg
9kg
9kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	180 micrograms 1.8 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	9-36 mg 0.9-3.6 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	18 mg 0.72 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	18 mg 1.8 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	0.9 mg 0.9 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	9 -18 micrograms 0.9 -1.8 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	0.9 mg 0.9 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (2 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	18 mg 1.8 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	4.5 mg 0.45 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	9 mg 0.9 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	144 mg 1.4 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

9kg
9kg
9kg
9kg
9kg
9kg
9kg
9kg
9kg
9kg

10kg

1 year

HR: 100-140 RR: 25-35 BP_(systolic): 85-95

10kg

10kg

10kg

10kg

10kg

10kg

10kg

10kg

10kg

10k

Airway	OP Airway Size: 0	ETT Diameter: Cuffed: 3.5 mm Uncuffed: 4.5 mm
	LMA Size: 1.5- 2	ETT Length : Oral: 13.5 cm Nasal: 15.5 cm

Drug		Required Dose	Dose to be given	Volume	Additional Instructions
Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	100 micrograms	1 ml	Max 1mg to be given
	Anaphylaxis-IM	5 microgram/kg Use 1:1000	50 micrograms	0.05 ml	
	Croup-Neb	400 microgram /kg Use 1:1000	4 mg	4 ml	
Energy	VF/pulseless VT	4J/Kg	40 J (Round up)		
Adenosine	1st Dose	100 microgram/kg	1 mg	0.3 ml	Max 3mg
	2nd Dose	200 microgram/kg	2 mg	0.67 ml	Max 6mg
	3rd Dose	300 microgram/kg	3 mg	1 ml	Max 12mg
Amiodarone		5 mg/kg	50 mg	1 ml	Further dilute to 10ml with 5% glucose Max 300mg
Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	10 mmol	20 ml	
	8.4%	1mmol/kg (1ml/kg)	10 mmol	10 ml	
10% Calcium Chloride		0.2ml/kg	2 ml	2 ml	Slow Iv injection (max 10 ml)

Fluids	Crystalloid	Trauma (10 mL/kg):	100 ml	Blood, FFP or Platelets (10 mL/kg)	100 ml
		Other (20 mL/kg) :	200 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			20 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 70 mg	80 mg/kg OD over 30 min 800 mg

¹**Gentamicin:** Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	200 micrograms 2 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	10-40 mg 1-4 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	20 mg 0.8 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	20 mg 2 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	1 mg 1 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	10 -20 micrograms 1 -2 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	1 mg 1 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 10mg		
Suxamethonium (2 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	20 mg 2 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	5 mg 0.5 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	10 mg 1 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	160 mg 1.6 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

10kg 10kg 10kg 10kg 10kg 10kg 10kg 10kg 10kg 10kg 10kg

12kg

2 year

HR: 100-140 RR: 25-35 BP_(systolic): 85-95

Airway	OP Airway Size: 0-1	ETT Diameter: Cuffed: 4.0 mm Uncuffed: 4.5 mm
	LMA Size: 2	ETT Length : Oral: 13 cm Nasal: 16 cm

Drug		Required Dose	Dose to be given	Volume	Additional Instructions
Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	120 micrograms	1.2 ml	Max 1mg to be given
	Anaphylaxis-IM	5 microgram/kg Use 1:1000	60 micrograms	0.06 ml	
	Croup-Neb	400 microgram /kg Use 1:1000	4.8 mg	4.8 ml	
Energy	VF/pulseless VT	4J/Kg	48 J (Round up)		
Adenosine	1st Dose	100 microgram/kg	1.2 mg	0.4 ml	Max 3mg
	2nd Dose	200 microgram/kg	2.4 mg	0.8 ml	Max 6mg
	3rd Dose	300 microgram/kg	3.6 mg	1.2 ml	Max 12mg
Amiodarone		5 mg/kg	60 mg	1.2 ml	Further dilute to 10ml with 5% glucose Max 300mg
Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	12 mmol	24 ml	
	8.4%	1mmol/kg (1ml/kg)	12 mmol	12 ml	
10% Calcium Chloride		0.2ml/kg	2.4 ml	2.4 ml	Slow Iv injection (max 10 ml)

Fluids	Crystalloid	Trauma (10 mL/kg):	120 ml	Blood, FFP or Platelets (10 mL/kg)	120 ml
		Other (20 mL/kg) :	240 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			24 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 84 mg	80 mg/kg OD over 30 min 960 mg

¹**Gentamicin:** Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

12kg	12kg	12kg	12kg	12kg	12kg	12kg
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Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	240 micrograms 2.4 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	12-48 mg 1.2-4.8 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	24 mg 0.96 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	24 mg 2.4 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	1.2 mg 1.2 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	12-20 micrograms 1.2-2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	1.2 mg 1.2 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	12 mg 1.2 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	6 mg 0.6 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	12 mg 1.2 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	192 mg 1.9 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

12kg 12kg 12kg 12kg 12kg 12kg 12kg 12kg 12kg 12kg 12kg

14kg

3 years

HR:95-120 RR: 25- 30 BP_(systolic): 85-100

Airway	OP Airway Size: 1	ETT Diameter: Cuffed: 4.0 mm Uncuffed: 5.0 mm
	LMA Size: 2	ETT Length : Oral: 13.5 cm Nasal: 16.5 cm

Cardiac/ Resus	Drug		Required Dose	Dose to be given	Volume	Additional Instructions
	Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	140 micrograms	1.4 ml	Max 1mg to be given
		Anaphylaxis-IM	5 microgram/kg Use 1:1000	70 micrograms	0.07 ml	
		Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5 mg
	Energy	VF/pulseless VT	4J/Kg	56 J (Round up)		
	Adenosine	1st Dose	100 microgram/kg	1.4 mg	0.47 ml	Max 3mg
		2nd Dose	200 microgram/kg	2.8 mg	0.93 ml	Max 6mg
		3rd Dose	300 microgram/kg	4.2 mg	1.4 ml	Max 12mg
	Amiodarone		5 mg/kg	70 mg	1.4 ml	Further dilute to 10ml with 5% glucose Max 300mg
	Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	14 mmol	28 ml	
		8.4%	1mmol/kg (1ml/kg)	14 mmol	14 ml	
10% Calcium Chloride		0.2ml/kg	2.8 ml	2.8 ml	Slow Iv injection (max 10 ml)	

Fluids	Crystalloid	Trauma (10 mL/kg):	140 ml	Blood, FFP or Platelets (10 mL/kg)	140 ml
		Other (20 mL/kg) :	280 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			28 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 98 mg	80 mg/kg OD over 30 min 1.1 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

14kg 14kg 14kg 14kg 14kg 14kg 14kg 14kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	280 micrograms 2.8 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	14-56 mg 1.4-5.6 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	28 mg 1.12 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	28 mg 2.8 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	1.4 mg 1.4 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	14-20 micrograms 1.4- 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	1.4 mg 1.4 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	14 mg 1.4 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	7 mg 0.7 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	14 mg 1.4 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	224 mg 2.2 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

14kg 14kg 14kg 14kg 14kg 14kg 14kg 14kg 14kg 14kg 14kg

16kg

4 years

HR: 95-120 RR: 25-30 BP_(systolic): 85-100

Airway	OP Airway Size: 1	ETT Diameter: Cuffed: 4.5 mm Uncuffed: 5.0 mm
	LMA Size: 2	ETT Length : Oral: 14 cm Nasal: 17 cm

Cardiac/ Resus	Drug		Required Dose	Dose to be given	Volume	Additional Instructions
	Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	160 micrograms	1.6 ml	Max 1mg to be given
		Anaphylaxis-IM	5 microgram/kg Use 1:1000	80 micrograms	0.08 ml	
		Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5mg
	Energy	VF/pulseless VT	4J/Kg	64 J (Round up)		
	Adenosine	1st Dose	100 microgram/kg	1.6 mg	0.53 ml	Max 3mg
		2nd Dose	200 microgram/kg	3.2 mg	1.0 ml	Max 6mg
		3rd Dose	300 microgram/kg	4.8 mg	1.6 ml	Max 12mg
	Amiodarone		5 mg/kg	80 mg	1.6 ml	Further dilute to 10ml with 5% glucose Max 300mg
	Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	16 mmol	32 ml	
		8.4%	1mmol/kg (1ml/kg)	16 mmol	16 ml	
	10% Calcium Chloride		0.2ml/kg	3.2 ml	3.2 ml	Slow Iv injection (max 10 ml)

Fluids	Crystalloid	Trauma (10 mL/kg):	160 ml	Blood, FFP or Platelets (10 mL/kg)	160 ml
		Other (20 mL/kg) :	320 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			32 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 112 mg	80 mg/kg OD over 30 min 1.3g

¹Gentamicin: Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. **²Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

16kg 16kg 16kg 16kg 16kg 16kg 16kg 16kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	320 micrograms 3.2 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	16-64 mg 1.6-6.4 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	32 mg 1.3 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	32 mg 3.2 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	1.6 mg 1.6 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	16-20 micrograms 1.6- 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	1.6 mg 1.6 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	16 mg 1.6 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	8 mg 0.8 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	16 mg 1.6 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	256 mg 2.6 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

16kg 16kg 16kg 16kg 16kg 16kg 16kg 16kg 16kg 16kg 16kg

18kg

5 years

HR:95-120 RR: 25-30 BP_(systolic): 85-100

Airway	OP Airway Size: 1	ETT Diameter: Cuffed: 4.5 mm Uncuffed: 5.5 mm
	LMA Size: 2	ETT Length : Oral: 14.5 cm Nasal: 17.5 cm

Cardiac/ Resus	Drug		Required Dose	Dose to be given	Volume	Additional Instructions
	Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	180 micrograms	1.8 ml	Max 1mg to be given
		Anaphylaxis-IM	5 microgram/kg Use 1:1000	90 micrograms	0.09 ml	
		Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5 mg
	Energy	VF/pulseless VT	4J/Kg	72 J (Round up)		
	Adenosine	1st Dose	100 microgram/kg	1.8 mg	0.6 ml	Max 3mg
		2nd Dose	200 microgram/kg	3.6 mg	1.2 ml	Max 6mg
		3rd Dose	300 microgram/kg	5.4 mg	1.8 ml	Max 12mg
	Amiodarone		5 mg/kg	90 mg	1.8 ml	Further dilute to 10ml with 5% glucose Max 300mg
	Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	18 mmol	36 ml	
		8.4%	1mmol/kg (1ml/kg)	18 mmol	18 ml	
10% Calcium Chloride		0.2ml/kg	3.6 ml	3.6 ml	Slow Iv injection (max 10 ml)	

Fluids	Crystalloid	Trauma (10 mL/kg):	180 ml	Blood, FFP or Platelets (10 mL/kg)	180 ml
		Other (20 mL/kg) :	360 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			36 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 125 mg	80 mg/kg OD over 30 min 1.4 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. If patient is <44 weeks corrected gestational age use 4mg/kg dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

18kg	18kg	18kg	18kg	18kg	18kg	18kg
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Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	360 micrograms 3.6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	18-72 mg 1.8-7.2 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	36 mg 1.4 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	36 mg 3.6 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	1.8 mg 1.8 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	18-20 micrograms 1.8- 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	1.8 mg 1.8 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	18 mg 1.8 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	9 mg 0.9 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	18 mg 1.8 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	288 mg 2.9 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

18kg 18kg 18kg 18kg 18kg 18kg 18kg 18kg 18kg 18kg 18kg

20kg

5 years

HR: 95-120 RR: 25-30 BP_(systolic): 85-100

Airway	OP Airway Size: 1	ETT Diameter: Cuffed: 4.5 mm Uncuffed: 5.5 mm
	LMA Size: 2	ETT Length : Oral: 14.5 cm Nasal: 17.5 cm

Drug		Required Dose	Dose to be given	Volume	Additional Instructions
Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	200 micrograms	2 ml	Max 1mg to be given
	Anaphylaxis-IM	5 microgram/kg Use 1:1000	100 micrograms	0.1 ml	
	Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5 mg
Energy	VF/pulseless VT	4J/Kg	80 J (Round up)		
Adenosine	1st Dose	100 microgram/kg	2 mg	0.67 ml	Max 3mg
	2nd Dose	200 microgram/kg	4 mg	1.3 ml	Max 6mg
	3rd Dose	300 microgram/kg	6 mg	2 ml	Max 12mg
Amiodarone		5 mg/kg	100 mg	2 ml	Further dilute to 10ml with 5% glucose Max 300mg
Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	20 mmol	40 ml	
	8.4%	1mmol/kg (1ml/kg)	20 mmol	20 ml	
10% Calcium Chloride		0.2ml/kg	4 ml	4 ml	Slow Iv injection (max 10 ml)

Fluids	Crystalloid	Trauma (10 mL/kg):	200 ml	Blood, FFP or Platelets (10 mL/kg)	200 ml
		Other (20 mL/kg) :	400 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			40 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 140 mg	80 mg/kg OD over 30 min 1.6 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

20kg 20kg 20kg 20kg 20kg 20kg 20kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	400 micrograms 4 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	20-80 mg 2-8 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	40 mg 1.6 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	40 mg 4 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	2 mg 2 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	2 mg 2 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	20 mg 2 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	10 mg 1 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	20 mg 2 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	320 mg 3.2 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

25kg

6 years

HR: 80-120 RR: 20-25 BP_(systolic): 90-110

Airway	OP Airway Size: 1	ETT Diameter: Cuffed: 5.0 mm Uncuffed: 5.5 mm
	LMA Size: 2.5	ETT Length : Oral: 15 cm Nasal: 18 cm

Drug		Required Dose	Dose to be given	Volume	Additional Instructions
Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	250 micrograms	2.5 ml	Max 1mg to be given
	Anaphylaxis-IM	5 microgram/kg Use 1:1000	125 micrograms	0.125 ml	
	Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5 mg
Energy	VF/pulseless VT	4J/Kg	100 J (Round up)		
Adenosine	1st Dose	100 microgram/kg	2.5 mg	0.83 ml	Max 3mg
	2nd Dose	200 microgram/kg	5 mg	1.67 ml	Max 6mg
	3rd Dose	300 microgram/kg	7.5 mg	2.5 ml	Max 12mg
Amiodarone		5 mg/kg	125 mg	2.5 ml	Further dilute to 10ml with 5% glucose Max 300mg
Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	25 mmol	50 ml	
	8.4%	1mmol/kg (1ml/kg)	25 mmol	25 ml	
10% Calcium Chloride		0.2ml/kg	5 ml	5 ml	Slow Iv injection (max 10 ml)

Fluids	Crystalloid	Trauma (10 mL/kg):	250 ml	Blood, FFP or Platelets (10 mL/kg)	250 ml
		Other (20 mL/kg) :	500 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			50 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 175 mg	80 mg/kg OD over 30 min 2 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

25kg 25kg 25kg 25kg 25kg 25kg 25kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	500 micrograms 5 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	25-100 mg 2.5-10 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	50 mg 2 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	50 mg 5 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	2.5 mg 2.5 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	2.5 mg 2.5 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	25 mg 2.5 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	12.5 mg 1.25 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	25 mg 2.5 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	400 mg 4 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

25kg

25kg

25kg

25kg

25kg

25kg

25kg

25kg

25kg

25kg

28kg

7 years

HR: 80-120 RR: 20-25 BP_(systolic): 90-110

Airway	OP Airway Size: 1	ETT Diameter: Cuffed: 5.0 mm Uncuffed: 6.0 mm
	LMA Size: 2.5	ETT Length : Oral: 15.5 cm Nasal: 18.5 cm

Cardiac/ Resus	Drug		Required Dose	Dose to be given	Volume	Additional Instructions
	Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	280 micrograms	2.8 ml	Max 1mg to be given
		Anaphylaxis-IM	5 microgram/kg Use 1:1000	140 micrograms	0.14 ml	
		Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5 mg
	Energy	VF/pulseless VT	4J/Kg	112 J (Round up)		
	Adenosine	1st Dose	100 microgram/kg	2.8 mg	0.9ml	Max 3mg
		2nd Dose	200 microgram/kg	5.6 mg	1.9 ml	Max 6mg
		3rd Dose	300 microgram/kg	8.4 mg	2.8 ml	Max 12mg
	Amiodarone		5 mg/kg	140 mg	2.8 ml	Further dilute to 10ml with 5% glucose Max 300mg
	Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	28 mmol	56 ml	
		8.4%	1mmol/kg (1ml/kg)	28 mmol	28 ml	
10% Calcium Chloride		0.2ml/kg	5.6 ml	5.6 ml	Slow Iv injection (max 10 ml)	

Fluids	Crystalloid	Trauma (10 mL/kg):	280 ml	Blood, FFP or Platelets (10 mL/kg)	280 ml
		Other (20 mL/kg) :	560 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			56 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 200mg	80 mg/kg OD over 30 min 2.2 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

28kg 28kg 28kg 28kg 28kg 28kg 28kg 28kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	560 micrograms 5.6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	28-112 mg 2.8-11.2 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	56 mg 2.2 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	56 mg 5.6 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	2.8 mg 2.8 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	2.8 mg 2.8 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	28 mg 2.8 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	14 mg 1.4 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	28 mg 2.8 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	448 mg 4.5 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

28kg 28kg 28kg 28kg 28kg 28kg 28kg 28kg 28kg 28kg 28kg 28kg

31kg

8 years

HR: 80-120 RR: 20-25 BP_(systolic): 90-110

Airway	OP Airway Size: 1-2	ETT Diameter: Cuffed: 5.5 mm Uncuffed: 6.0 mm
	LMA Size: 2.5-3	ETT Length : Oral: 16 cm Nasal: 19 cm

Cardiac/ Resus	Drug		Required Dose	Dose to be given	Volume	Additional Instructions
	Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	310 micrograms	3.1 ml	Max 1mg to be given
		Anaphylaxis-IM	5 microgram/kg Use 1:1000	155 micrograms	0.155 ml	
		Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5 mg
	Energy	VF/pulseless VT	4J/Kg	124 J (Round up)		
	Adenosine	1st Dose	100 microgram/kg	3 mg	1 ml	Max 3mg
		2nd Dose	200 microgram/kg	6 mg	2 ml	Max 6mg
		3rd Dose	300 microgram/kg	9.3 mg	3.1 ml	Max 12mg
	Amiodarone		5 mg/kg	155 mg	3.1 ml	Further dilute to 10ml with 5% glucose Max 300mg
	Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	31 mmol	62 ml	
		8.4%	1mmol/kg (1ml/kg)	31 mmol	31 ml	
10% Calcium Chloride		0.2ml/kg	6.2 ml	6.2 ml	Slow Iv injection (max 10 ml)	

Fluids	Crystalloid	Trauma (10 mL/kg):	310 ml	Blood, FFP or Platelets (10 mL/kg)	310 ml
		Other (20 mL/kg) :	620 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			62 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 215 mg	80 mg/kg OD over 30 min 2.5 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

31kg 31kg 31kg 31kg 31kg 31kg 31kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	600 micrograms 6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	31-124 mg 3.1-12.4 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	62 mg 2.5 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	62 mg 6.2 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	3.1 mg 3.1 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 mcg/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	3.1 mg 3.1 ml of diluted solution
Repeat dose if necessary: each dose should be prescribed separately. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	31 mg 3.1 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	15.5 mg 1.55 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	31 mg 3.1 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	496 mg 5ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

31kg 31kg 31kg 31kg 31kg 31kg 31kg 31kg 31kg 31kg 31kg

34kg

9 years

HR:80-120 RR: 20-25 BP_(systolic): 90-110

Airway	OP Airway Size: 1-2	ETT Diameter: Cuffed: 5.5 mm Uncuffed: 6.5 mm
	LMA Size: 3	ETT Length : Oral: 16.5 cm Nasal: 19.5 cm

Cardiac/ Resus	Drug		Required Dose	Dose to be given	Volume	Additional Instructions
	Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	340 micrograms	3.4 ml	Max 1mg to be given
		Anaphylaxis-IM	5 microgram/kg Use 1:1000	170 micrograms	0.17 ml	
		Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5 mg
	Energy	VF/pulseless VT	4J/Kg	136 J (Round up)		
	Adenosine	1st Dose	100 microgram/kg	3 mg	1 ml	Max 3mg
		2nd Dose	200 microgram/kg	6 mg	2 ml	Max 6mg
		3rd Dose	300 microgram/kg	10 mg	3.4 ml	Max 12mg
	Amiodarone		5 mg/kg	170 mg	3.4 ml	Further dilute to 10ml with 5% glucose Max 300mg
	Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	34 mmol	68 ml	
		8.4%	1mmol/kg (1ml/kg)	34 mmol	34 ml	
10% Calcium Chloride		0.2ml/kg	6.8 ml	6.8 ml	Slow Iv injection (max 10 ml)	

Fluids	Crystalloid	Trauma (10 mL/kg):	340 ml	Blood, FFP or Platelets (10 mL/kg)	340 ml
		Other (20 mL/kg) :	680 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			68 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 240 mg	80 mg/kg OD over 30 min 2.7 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

34kg 34kg 34kg 34kg 34kg 34kg 34kg 34kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	600 micrograms 6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	34-136 mg 3.4-13.6 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	68 mg 2.7 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	68 mg 6.8 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	3.4 mg 3.4 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	3.4 mg 3.4 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	34 mg 3.4 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	17 mg 1.7 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	34 mg 3.4 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	544 mg 5.4 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

34kg 34kg 34kg 34kg 34kg 34kg 34kg 34kg 34kg 34kg

37kg

10 years

HR: 80-120 RR: 20-25 BP_(systolic): 90-110

Airway	OP Airway Size: 2-3	ETT Diameter: Cuffed: 6.0 mm Uncuffed: 6.5 mm
	LMA Size: 3	ETT Length : Oral: 17 cm Nasal: 20 cm

Cardiac/ Resus	Drug		Required Dose	Dose to be given	Volume	Additional Instructions
	Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	370 micrograms	3.7 ml	Max 1mg to be given
		Anaphylaxis-IM	5 microgram/kg Use 1:1000	185 micrograms	0.185 ml	
		Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5 mg
	Energy	VF/pulseless VT	4J/Kg	148 J (Round up)		
	Adenosine	1st Dose	100 microgram/kg	3 mg	1 ml	Max 3mg
		2nd Dose	200 microgram/kg	6 mg	2 ml	Max 6mg
		3rd Dose	300 microgram/kg	11 mg	3.7 ml	Max 12mg
	Amiodarone		5 mg/kg	185 milligrams	3.7 ml	Further dilute to 10ml with 5% glucose Max 300mg
	Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	37 mmol	74 ml	
		8.4%	1mmol/kg (1ml/kg)	37 mmol	37 ml	
10% Calcium Chloride		0.2ml/kg	7.4 ml	7.4 ml	Slow Iv injection (max 10 ml)	

Fluids	Crystalloid	Trauma (10 mL/kg):	370 ml	Blood, FFP or Platelets (10 mL/kg)	370 ml
		Other (20 mL/kg) :	740 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			74 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 260 mg	80 mg/kg OD over 30 min 2.9 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

37kg 37kg 37kg 37kg 37kg 37kg 37kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	600 micrograms 6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	37-148 mg 3.7-14.8 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	75 mg 3 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	74 mg 7.4 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	3.7 mg 3.7 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	3.7 mg 3.7 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	37 mg 3.7 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	18.5 mg 1.85 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	37 mg 3.7 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	592 mg 5.9 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

37kg 37kg 37kg 37kg 37kg 37kg 37kg 37kg 37kg 37kg 37kg 37kg

40kg

11 years

HR: 80-120 RR: 20-25 BP_(systolic): 90-110

Airway	OP Airway Size: 3-4	ETT Diameter: Cuffed: 6.0 mm Uncuffed: 7.0 mm
	LMA Size: 3	ETT Length : Oral: 17.5 cm Nasal: 20.5 cm

Cardiac/ Resus	Drug		Required Dose	Dose to be given	Volume	Additional Instructions
	Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	400 micrograms	4 ml	Max 1mg to be given
		Anaphylaxis-IM	5 microgram/kg Use 1:1000	200 micrograms	0.2 ml	
		Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5 mg
	Energy	VF/pulseless VT	4J/Kg	160 J (Round up)		
	Adenosine	1st Dose	100 microgram/kg	3 mg	1 ml	Max 3mg
		2nd Dose	200 microgram/kg	6 mg	2 ml	Max 6mg
		3rd Dose	300 microgram/kg	12 mg	4 ml	Max 12mg
	Amiodarone		5 mg/kg	200 mg	4 ml	Further dilute to 10ml with 5% glucose Max 300mg
	Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	40 mmol	80 ml	
		8.4%	1mmol/kg (1ml/kg)	40 mmol	40 ml	
10% Calcium Chloride		0.2ml/kg	8 ml	8 ml	Slow Iv injection (max 10 ml)	

Fluids	Crystalloid	Trauma (10 mL/kg):	400 ml	Blood, FFP or Platelets (10 mL/kg)	400 ml
		Other (20 mL/kg) :	800 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			80 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 280 mg	80 mg/kg OD over 30 min 3.2 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

40kg 40kg 40kg 40kg 40kg 40kg 40kg 40kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	600 micrograms 6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	40-160 mg 4-16 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	80 mg 3.2 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	80 mg 8 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	4 mg 4 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 micrograms/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	4 mg 4 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	40 mg 4 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	20 mg 2 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	40 mg 4 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	640 mg 6.4 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

40kg 40kg 40kg 40kg 40kg 40kg 40kg 40kg 40kg 40kg

43kg

12 years

HR: 80-120 RR: 20-25 BP_(systolic): 90-110

Airway	OP Airway Size: 3-4	ETT Diameter: Cuffed: 6.5 mm Uncuffed: 7.0 mm
	LMA Size: 3	ETT Length : Oral: 18 cm Nasal: 21 cm

Cardiac/ Resus						
Drug		Required Dose	Dose to be given	Volume	Additional Instructions	
Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	430 micrograms	4.3 ml	Max 1mg to be given	
	Anaphylaxis-IM	5 microgram/kg Use 1:1000	215 micrograms	0.22 ml		
	Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	Max 5 mg	
Energy	VF/pulseless VT	4J/Kg	172 J (Round up)			
Adenosine	1st Dose	100 microgram/kg	3 mg	1 ml	Max 3mg	
	2nd Dose	200 microgram/kg	6 mg	2 ml	Max 6mg	
	3rd Dose	300 microgram/kg	12 mg	3 ml	Max 12mg	
Amiodarone		5 mg/kg	215 mg	4.3 ml	Further dilute to 10ml with 5% glucose Max 300mg	
Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	43 mmol	86 ml		
	8.4%	1mmol/kg (1ml/kg)	43 mmol	43 ml		
10% Calcium Chloride		0.2ml/kg	8.6 ml	8.6 ml	Slow Iv injection (max 10 ml)	

Fluids	Crystalloid	Trauma (10 mL/kg):	430 ml	Blood, FFP or Platelets (10 mL/kg)	430 ml
		Other (20 mL/kg) :	860 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)		86 ml	Mannitol 20 % (1.25-2.5ml/kg)	55- 110 ml

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 300 mg	80 mg/kg OD over 30 min 3.4g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

43kg 43kg 43kg 43kg 43kg 43kg 43kg 43kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	600 micrograms 6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	43-172 mg 4.3-17.2 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	85 mg 3.5 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	85 mg 8.5 ml of diluted Solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	4.3 mg 4.3 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	4.3 mg 4.3 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	43 mg 4.3 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	22 mg 2.2 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	43 mg 4.3 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	688 mg 6.9 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

43kg

43kg

43kg

43kg

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43kg

43kg

43kg

43kg

45kg
>12 years
HR:60-100
RR: 15-20
BP_(systolic): 100-120
Airway
OP Airway Size: 3-4
ETT Diameter: Cuffed: 6.5 mm
Uncuffed: 7.5 mm
LMA Size: 3
ETT Length : Oral: 18.5 cm
Nasal: 21.5 cm
Cardiac/ Resus
Drug
Required Dose
Dose to be given
Volume
Additional Instructions
Adrenaline
Arrest-IV
**10 microgram /kg
Use 1:10,000**
450 micrograms
4.5 ml
Max 1mg to be given
Anaphylaxis-IM
**5 microgram/kg
Use 1:1000**
230 microgram
0.23 ml
Croup-Neb
**400 microgram /kg
Use 1:1000**
5 mg
5 ml
max 5 ml
Energy
VF/pulseless VT
4J/Kg
180 J (Round up)
Adenosine
1st Dose
100 microgram/kg
3 mg
1 ml
Max 3mg
2nd Dose
200 microgram/kg
6 mg
2 ml
Max 6mg
3rd Dose
300 microgram/kg
12 mg
4 ml
Max 12mg
Amiodarone
5 mg/kg
225 mg
4.5 ml
**Further dilute to 10ml
with 5% glucose **Max
300mg****
Sodium Bicarb
4.2%
1mmol/kg (2ml/kg)
45 mmol
90 ml
8.4%
1mmol/kg (1ml/kg)
45 mmol
45 ml
10% Calcium Chloride
0.2ml/kg
9 ml
9 ml
**Slow Iv injection (max
10 ml)**
Fluids
Crystalloid
Trauma (10 mL/kg):
450 ml
**Blood, FFP or Platelets
(10 mL/kg)**
450 ml
Other (20 mL/kg) :
900 ml
10% Dextrose (2 mL/kg): (Hypoglycaemia)
90 ml
**Mannitol 20 %
(1.25-2.5ml/kg)**
55- 110 ml
Sepsis
Gentamicin¹
Ceftriaxone²
Over 3 months
7 mg/ Kg OD (over 30 min)
80 mg/kg OD over 30 min
315 mg
3.6g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

45kg
45kg
45kg
45kg
45kg
45kg
45kg
45kg
45kg
45kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	600 micrograms 6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	45-180 mg 4.5-18 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	90 mg 3.6 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	90 mg 9 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	4.5 mg 4.5 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	4.5 mg 4.5 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	45 mg 4.5 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	22.5 mg 2.25 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	45 mg 4.5 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	720 mg 7.2 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

45kg

45kg

45kg

45kg

45kg

45kg

45kg

45kg

45kg

45kg

50kg

>12 years

HR:60-100

RR: 15-20

BP_(systolic): 100-120

Airway	OP Airway Size: 3-4	ETT Diameter: Cuffed: 7.0 mm Uncuffed: 7.5 mm
	LMA Size: 3	ETT Length : Oral: 20 cm Nasal: 22 cm

Cardiac/ Resus	Drug		Required Dose	Dose to be given	Volume	Additional Instructions
	Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	500 micrograms	5 ml	Max 1mg to be given
		Anaphylaxis-IM	5 microgram/kg Use 1:1000	250 micrograms	0.25 ml	
		Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	max 5 ml
	Energy	VF/pulseless VT	4J/Kg	200 J (Round up)		
	Adenosine	1st Dose	100 microgram/kg	3 mg	1 ml	Max 3mg
		2nd Dose	200 microgram/kg	6 mg	2 ml	Max 6mg
		3rd Dose	300 microgram/kg	12 mg	4 ml	Max 12mg
	Amiodarone		5 mg/kg	250 mg	5 ml	Further dilute to 10ml with 5% glucose Max 300mg
	Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	50 mmol	100 ml	
8.4%		1mmol/kg (1ml/kg)	50 mmol	50 ml		
10% Calcium Chloride		0.2ml/kg	10 ml	10 ml	Slow Iv injection (max 10 ml)	

Fluids	Crystalloid	Trauma (10 mL/kg):	500 ml	Blood, FFP or Platelets (10 mL/kg)	500 ml
		Other (20 mL/kg) :	1000 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			100 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 350 mg	80 mg/kg OD over 30 min 4g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

50kg 50kg 50kg 50kg 50kg 50kg 50kg 50kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	600 micrograms 6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	50-200 mg 5-20 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	100 mg 4 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	100 mg 10 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	5 mg 5 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	5 mg 5 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	50 mg 5 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	25 mg 2.5 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	50 mg 5 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	800 mg 8 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

50kg 50kg 50kg 50kg 50kg 50kg 50kg 50kg 50kg 50kg

55kg

>12 years

HR:60-100

RR: 15-20

BP_(systolic): 100-120

Airway	OP Airway Size: 3-4	ETT Diameter: Cuffed: 7.0 mm Uncuffed: 8.0 mm
	LMA Size: 3	ETT Length : Oral: 20.5 cm Nasal: 22.5 cm

Drug		Required Dose	Dose to be given	Volume	Additional Instructions
Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	550 micrograms	5.5 ml	Max 1mg to be given
	Anaphylaxis-IM	5 microgram/kg Use 1:1000	280 microgram	0.28 ml	
	Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	max 5 ml
Energy	VF/pulseless VT	4J/Kg	220 J (Round up)		
Adenosine	1st Dose	100 microgram/kg	3 mg	1 ml	Max 3mg
	2nd Dose	200 microgram/kg	6 mg	2 ml	Max 6mg
	3rd Dose	300 microgram/kg	12 mg	4 ml	Max 12mg
Amiodarone		5 mg/kg	275 mg	5.5 ml	Further dilute to 10ml with 5% glucose Max 300mg
Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	55 mmol	110 ml	
	8.4%	1mmol/kg (1ml/kg)	55 mmol	55 ml	
10% Calcium Chloride		0.2ml/kg	11 ml	11 ml	Slow Iv injection (max 10 ml)

Fluids	Crystalloid	Trauma (10 mL/kg):	550 ml	Blood, FFP or Platelets (10 mL/kg)	550 ml
		Other (20 mL/kg) :	1100 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			110 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 385 mg	80 mg/kg OD over 30 min 4 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

55kg 55kg 55kg 55kg 55kg 55kg 55kg 55kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	600 micrograms 6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	55-220 mg 5.5-22 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	110 mg 4.4 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	110 mg 11 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	5 mg 5 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 micrograms 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	5.5 mg 5.5 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	55 mg 5.5 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	27.5 mg 2.75 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	55 mg 5.5 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use ' ideal body weight '.		
Sugammadex (16 mg/kg)	Neat (100mg/ml)	880 mg 8.8 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

55kg

55kg

55kg

55kg

55kg

55kg

55kg

55kg

55kg

55kg

60kg

>12 years

HR:60-100

RR: 15-20

BP_(systolic): 100-120

Airway	OP Airway Size: 3-4	ETT Diameter: Cuffed: 7.0 mm Uncuffed: 8.0 mm
	LMA Size: 3	ETT Length : Oral: 21 cm Nasal: 23 cm

Cardiac/ Resus						
Drug		Required Dose	Dose to be given	Volume	Additional Instructions	
Adrenaline	Arrest-IV	10 microgram /kg Use 1:10,000	600 micrograms	6 ml	Max 1mg to be given	
	Anaphylaxis-IM	5 microgram/kg Use 1:1000	300 micrograms	0.3 ml		
	Croup-Neb	400 microgram /kg Use 1:1000	5 mg	5 ml	max 5 ml	
Energy	VF/pulseless VT	4J/Kg	240 J (Round up)			
Adenosine	1st Dose	100 microgram/kg	3 mg	1ml	Max 3mg	
	2nd Dose	200 microgram/kg	6 mg	2 ml	Max 6mg	
	3rd Dose	300 microgram/kg	12 mg	4 ml	Max 12mg	
Amiodarone		5 mg/kg	300 mg	6 ml	Further dilute to 10ml with 5% glucose Max 300mg	
Sodium Bicarb	4.2%	1mmol/kg (2ml/kg)	60 mmol	120 ml		
	8.4%	1mmol/kg (1ml/kg)	60 mmol	60 ml		
10% Calcium Chloride		0.2ml/kg	12 ml	12 ml	Slow Iv injection (max 10 ml)	

Fluids	Crystalloid	Trauma (10 mL/kg):	600 ml	Blood, FFP or Platelets (10 mL/kg)	600 ml
		Other (20 mL/kg) :	1200 ml		
	10% Dextrose (2 mL/kg): (Hypoglycaemia)			120 ml	Mannitol 20 % (1.25-2.5ml/kg)

Sepsis		Gentamicin ¹	Ceftriaxone ²
	Over 3 months	7 mg/ Kg OD (over 30 min) 420 mg	80 mg/kg OD over 30 min 4 g

¹**Gentamicin:** Pre-dose level required before 2nd dose. ²**Ceftriaxone:** If inotropes are needed, use Cefotaxime 50 mg/kg 6 hourly.

60kg 60kg 60kg 60kg 60kg 60kg 60kg 60kg

Drug (Dose)	Neat or Dilution (mg/mL)	Volume to be given (mL)
Atropine (20 microgram/kg)	Dilute 600 microgram (1ml) of 600mcg/ml solution to 6ml with 0.9% sodium chloride to give 100 microgram in 1 ml	600 micrograms 6 ml of diluted solution
Do not give less than 100 microgram. Maximum dose 600 microgram. Blocks vagal activity, increases heart rate		
Propofol (1-4 mg/kg)	NEAT (10 mg/mL) Use Neat 1% solution	60-240 mg 6-24 ml of Neat solution
Thiopental IV (2mg/kg)	Add 20ml water for injection to 500mg vial to give 25 mg in 1 ml	120 mg 4.8 ml of diluted solution
Use LOW (1mg/kg) dose if cardiovascular instability or hypotensive state. Repeat dose if necessary		
Ketamine IV (2 mg/kg)	Dilute 100 mg (2ml) of 50 mg in 1 ml solution to 10 ml with 0.9% sodium chloride to give 10mg in 1 ml. BEWARE of different concentrations of ketamine available.	120 mg 12 ml of diluted solution
Do NOT use if seizures or raised ICP. Used in hypotensive states and asthma		
Midazolam IV (0.1 mg/kg)	Dilute 10mg (2ml) of 5mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg in 1ml	5 mg 5 ml of diluted solution
For intubation this drug is used as an adjunct rather than the sole drug of choice. Maximum dose 5mg		
Fentanyl (1-2 microgram/kg)	Dilute 50 micrograms (1ml) of 50 microgram/ml solution to 5ml with 0.9% sodium chloride to give 10 microgram/ml	20 microgram 2 ml of diluted solution
Repeat dose if necessary. Maximum dose 20 micrograms		
Morphine (0.1 mg/kg)	Dilute 10mg (1ml) of 10mg/ml solution to 10ml with 0.9% sodium chloride to give 1mg/ml	6 mg 6 ml of diluted solution
Repeat dose if necessary. Maximum dose 10mg		
Suxamethonium (1 mg/kg)	Dilute 100mg (2ml) of 50mg/ml solution to 10ml with 0.9% sodium chloride to give 10mg/ml	6 mg 6 ml of diluted solution
Depolarising muscle relaxant. Duration: 2-5mins. Maximum dose: 100mg. Contraindications: Burns, Myopathies, Hyperkalaemia.		
Atracurium (0.5 mg/kg)	NEAT (10 mg/mL)	30 mg 3 ml of Neat Solution
Non-depolarising muscle relaxant. Duration: 15-35mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Rocuronium (1 mg/kg)	Neat (10mg/ml)	60 mg 6 ml of Neat solution
Non-depolarising muscle relaxant. Duration: 30-40mins. To avoid excessive dosage in obesity Use 'ideal body weight'.		
Sugammadex (16 mg/kg)	Neat	960 mg 9.6 ml of Neat solution
Give by direct injection over 10 seconds, or as quickly as possible. Rocuronium cannot be used for 24 hours after sugammadex given. DO NOT give Flucloxacillin or fusidic acid for at least 6 hours after sugammadex. These drugs can replace rocuronium from sugammadex.		

60kg 60kg 60kg 60kg 60kg 60kg 60kg 60kg 60kg 60kg

Title of Guideline (must include the word “Guideline” (not protocol, policy, procedure etc)		Paediatric Critical Care Data Sheets
	Contact Name and Job Title (author)	Dusan Raffaj (PCCU Consultant) Abigail Hill (PCCU Sister) Andrew Wignell (Pharmacist)
	Directorate & Speciality	Directorate: Family Health – Children Speciality: PICU
	Date of submission	October 2016
	Date when guideline reviewed	October 2018
	Guideline Number	(Allocated by Guideline Lead)
	Explicit definition of patient group to which it applies (e.g. inclusion and exclusion criteria, diagnosis)	
	Abstract	
	Key Words	Paediatrics. Children. Data sheet. Drug doses. Emergency drugs
	Statement of the evidence base of the guideline – has the guideline been peer reviewed by colleagues?	
1a	meta analysis of randomised controlled trials	.
2a	at least one well-designed controlled study without randomisation	
2b	at least one other type of well-designed quasi-experimental study	
3	well –designed non-experimental descriptive studies (ie comparative / correlation and case studies)	
4	expert committee reports or opinions and / or clinical experiences of respected authorities	x
5	recommended best practise based on the clinical experience of the guideline developer	
	Consultation Process	Staff at Nottingham Children’s Hospital via the Guidelines E-mail process. Data sheet adapted with kind permission from Hannah King & James Armstrong
	Target audience	Staff at the Nottingham Children’s Hospital and referring DGH
	This guideline has been registered with the trust. However, clinical guidelines are guidelines only. The interpretation and application of clinical guidelines will remain the responsibility of the individual clinician. If in doubt contact a senior colleague or expert. Caution is advised when using guidelines after the review date.	



Document Control

Document Amendment Record

Version	Issue Date	Author
V1		
V2		

General Notes:

Summary of changes for new version: